FRANKLIN COUNTY FISCAL COURT WELLNESS ACTIVITY LOG

Date	Activity	Quantity/Duration	Reward Hours	Wellness Coordinator	Supervisor's	
				Initials	Signature	
		·	Total:			
Many activities wil	I be based on the honor	system. Any fraudulent cl	laims will result in terr	 mination from current and f	uture wellness	
program, forfeiture	e of all accumulated well	ness time, and may result	in disciplinary action.			
My activities are complete and true.		To the	To the best of my knowledge, the above is true.			
Signature of Employee/Participant		 Signat	Signature of Wellness Coordinator			